



# Transmittal of Payment of Issue Fee

Docket Number

LVIP:111US

In Re Application Of: **Heinz PLANK**

Application No.	10/784,461
Filing Date	February 23, 2004
Examiner	BUI, Luan Kim
Art Unit	3728

## Title of Invention

**TRANSPORT CONTAINER FOR SLIDES FOR IMMUNOLOGICAL LABELING FOR THIN TISSUE SECTIONS**

### COMMISSIONER FOR PATENTS:

Transmitted herewith are the following for the above-identified application.

☒ Issue Fee Transmittal Form PTOL-85

☐ Utility Fee

☐ Design Fee

☐ Plant Fee

☒ Publication Fee

Fees Calculated below:

### Fee Calculation

Issue Fee (from above)		\$1440
Publication Fee (from above)		\$300
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.	<b>TOTAL</b>	<b>\$1740</b>

### Method of Payment

☒ Deposit Account ☐ Credit Card ☒ Check ☐ Money Order ☐ Other: \_\_\_\_\_

Deposit Account Number **50-0822**

**For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)**

☐ Charge the fee(s) set forth above

☒ Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17

☐ Charge fee(s) indicated above, except for the filing fee

☒ Credit any overpayments

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on form PTO-2038.**

Amount Grand Total **\$1740**

# Transmittal of Payment of Issue Fee

Docket Number

LVIP:111US

## Correspondence Address

Customer Number 24041

-OR-

Name

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## Certificate of Mailing by Express

I hereby certify that this Associate Power of Attorney and accompanying documents are being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450 on the date indicated below:

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(Signature of Person Mailing Correspondence)

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July 1, 2008

Robert C. Atkinson

(Date of Mailing)

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## Signature Instructions

Select the name of the person who will electronically sign the application from the drop-down box below.

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Signatory Drop-Down Box

Atkinson, Robert C.

Name

Robert C. Atkinson

Registration Number

57,584

Signatory Capacity

Attorney for Applicant(s)

E-mail Address

ratkinson@idealawyers.com

eSign

Date Signed

7-1-08

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to : **Mail** Mail Stop ISSUE FEE

Commissioner for Patents

P.O. Box 1450

Alexandria, Virginia 22313-1450

or **Fax** (571) 273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)

**SIMPSON & SIMPSON, PLLC**  
**5555 Main Street**  
**Williamsville, New York 14221**



Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

## Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

**Robert C. Atkinson** (Depositor's name)  
 (Signature)  
 July 1, 2008 (Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/784,461

February 23, 2004

Heinz PLANK

LVIP:111US

8252

TITLE OF INVENTION:

TRANSPORT CONTAINER FOR SLIDES FOR IMMUNOLOGICAL LABELING FOR THIN TISSUE SECTIONS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
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nonprovisional

NO

\$1440

\$300

\$1740

07/24/2008

EXAMINER	ART UNIT	CLASS-SUBCLASS
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BUI, Luan Kim

3728

206-456000

11/27/2008 HNGUYEN2 00000049 10784461

01 FC:1501

02 FC:1504

1440.00 OP

300.00 OP

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.

☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,

(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 **SIMPSON & SIMPSON, PLLC**

2 \_\_\_\_\_

3 \_\_\_\_\_

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

**LEICA MIKROSYSTEME GMBH****Vienna, AUSTRIA**

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual☒ Corporation or other private group entity☐ Government

4a. The following fee(s) are enclosed:

☒ Issue Fee☒ Publication Fee (No small entity discount permitted)☐ Advance Order - # of Copies \_\_\_\_\_

4b. Payment of Fee(s):

☒ A check in the amount of the fee(s) is enclosed.☐ Payment by credit card. Form PTO-2038 is attached.☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **50-0822** (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date **July 1, 2008**

Typed or printed name

**Robert C. Atkinson**Registration No. **57,584**

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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